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PTQ/\$B/22 (07-06)

| PET | ITION FOR EXTENSION OF TIME UNDER 3 | Docket Number (Opt | Ional) 023070-1302 | 2000S | | |
|--|---|----------------------------------|-----------------------------|----------------------------|---------|--|
| FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2006 (H.R. 4818).) | | | | | | |
| Application Number 09/847,102 | | | Filed May 1, 200 | Filed May 1, 2001 | | |
| For \$TU | IMMUNOLOGIC COMPOSITIONS AND METHOD DYING AND TREATING CANCERS EXPRESSING IGENS | | | • | | |
| Art Unit 1642 | | | Examiner Misook Yu, Ph.D. | | | |
| | is a request under the provisions of 37 CFR 1.136(cation. | (a) to extend the pe | riod for filing a reply i | n the above Identifie | d | |
| The | requested extension and fee are as follows (check | time period destre | and enter the approp | priate fee below): | | |
| | | <u>Fee</u> | Small Entity Fe | | | |
| | One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | \$ 60 | | |
| | Two months (37 CFR 1.17(a)(2)) | \$45 0 | \$225 | . \$ | · | |
| | Three months (37 CFR 1.17(a)(3)) | \$1020 | \$510 | \$ | | |
| | Four months (37 CFR 1.17(a)(4)) | \$1590 | \$79 5 | \$ | | |
| | Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1080 | \$ | | |
| \boxtimes | Applicant claims small entity status. See 37 CFF | R 1.27. | 02/02/2007 TL0111 | 00000055 201430 | 0984110 | |
| | A check in the amount of the fee is enclosed. | | 01 FC:2251 | 60.00 DA | | |
| | Payment by credit card. Form PTO-2038 is attached. | | | | | |
| The Director has already been authorized to charge fees in this application to a Deposit Account | | | | | | |
| | The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>20-1430</u> . I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | |
| l a | m the applicant/inventor. | | , | | | |
| | assignee of record of the entire Statement under 37 CFR 3. | | | | | |
| | attorney or agent of record. Re | gistration Number_ | 51,868 | | | |
| | attorney or agent under 37 CFR Registration number if acting un | (1.34. 1der 37 CFR 1.34 | | _ | | |
| | MH 1 11/1 | 1 | Febru | ary 1, 2007 | | |
| | Signature | | | Date | | |
| | Beth L. Kelly, Reg. No. 81,868 Typed or printed frame | 415/576-0200 Telephone Number | | - | | |
| | | | • | | | |
| NOTE one sig | : Signatures of all the Inventors or assignees of record of the enti- gnature is required, see below. | re interest or their repres | entative(s) are required. S | ubmit multiple forms if mo | re than | |
| | Total of forms are su | ibmitted. | • | | | |

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